Application for 16-19 Discretionary Bursary Funding
Academic Year 2026/27

Financial Assessment Form

Section 1:

1.1 Student Details

Surname
First name(s)
Year Group on 1st September 2026
Date of birth (dd / mm / yyyy)
Age on 1st September 2026
NOTE: Student must be under 19 in the academic year in which they start their study

1.2 Student Address

Home address
Post code
Home telephone number
Mobile telephone number

1.3 Name of School

1.4 Sixth Form course details (Name of A level subjects to be studied)

1.5 Payment

Where possible Tadcaster Grammar School will purchase equipment, i.e. books, equipment on behalf of the student, other payments will be made direct to School Departments on your behalf. Any refunds are made by BACS direct to bank accounts. No cash payments are made.

Please indicate if Bursary funding is awarded, which areas of educational related costs would be a priority. Example: Travel costs to Sixth Form, equipment, stationary, school books, art pack, chromebook, etc.

Priority 1	Priority 2	Priority 3	Priority 4

Section 2: Parent / Carer to complete:

2.1 Financial Information

Is the child the application is being made for entitled to Free School Meals? If so, please indicate if Targeted or Expanded and date eligibility began.	*(Please delete as appropriate)* Yes / No Targeted: Yes/No Expanded: Yes /No Date began:
Is the child the application is being made for a Looked After Child or a Care Leaver? (If yes, please give the date of when they entered your care or for care leavers, the date when they left care)	*(Please delete as appropriate)* Yes / No Date:
Is your Household income less than £33,000?	*(Please delete as appropriate)* Yes / No

If student(s) are in receipt of Targeted Free School Meals for the relevant Academic Year, you do not need to provide further financial information in the Financial Assessment section. (Confirmation will be made with the relevant Authority). However, where you may be eligible to receive an award of £1,200/year as a member of a named vulnerable, you will need to provide Entitlement evidence to support that claim related to certain benefit categories below.

2.1 Household Members *(Living at the same address as Student)*

	Person 1	Person 2
Surname		
First name(s)		
Address (inc post code)		
Relationship to learner		
Telephone		

2.3 Financial Assessment - Household Income *(maximum £33,000)*

Person 1	Are you employed? (Yes / No) If yes, please submit P60 for details
Person 2	Are you employed? (Yes / No) If yes, please submit P60 for details

If you are not employed please tick the relevant boxes to indicate the benefit(s) you receive and ***provide the necessary evidence.***

Benefit received	**Income Support**	**Jobseekers Allowance**	**Employment Support**	**Carer's Allowance**	**Incapacity Benefit**	**Other benefit (please specify)**
Person 1						

Person 2						

2.4 Financial Assessment - Other Income

Please tick the relevant boxes to indicate all other income received into the household and ***provide the necessary evidence.***

Other Income	**Working Tax Credit**	**Child Tax Credit**	**Child Credit Benefit**	**Any other income / benefit / Grants or Bursaries etc - please specify eg disability living allowance**
Person 1				
Person 2				
Applicant				

Section 3:

3.1 Evidence

Whatever you have declared in 2.3 and 2.4 above must be backed up by evidence (photocopies accepted) in order for an assessment to be made.

The tables below show the evidence you will need to provide with your application form. Once you have declared and identified your benefits on the application, find the 'Types of Income' that applies to you in the first column and the 'Evidence Required' column will tell you what you need to provide.

Type of Income	**Evidence Required**
Annual Salary	P60 for relevant tax year
Income Support	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Job Seekers Allowance	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Disability Living Allowance	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Employment Support Allowance	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Incapacity Benefit	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Carer's Allowance	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year

Housing Benefit	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Any other benefit	Entitlement / Award letter - dated within the last 3 months from September of new Academic Year
Working Tax Credit	Working Tax Credit Award Notice relevant year. Must be for the full year and not partial awards **(FULL AWARD NOTICE)**
Child Tax Credit	Working Tax Credit Award Notice relevant year. Must be for the full year and not partial awards **(FULL AWARD NOTICE)**
Child Benefit	Award letter **(Award Notice relevant year)**
Grants or bursaries	Relevant paperwork detailing entitlement and amount paid
Any other income	Relevant paperwork

Section 4:

4.1 Declaration

PLEASE CAREFULLY READ THE DECLARATION BELOW BEFORE SIGNING:

i) I declare that the statements made on this form are true and to the best of my knowledge and belief are correct in every respect.
I undertake to supply any additional information that may be required to verify the particulars given.
I understand that if I refuse to provide information relevant to my claim the application will not be accepted. I also undertake to inform the school of any alteration to any of the particulars in writing.
I agree to repay the school in full and immediately any sums advanced to me if the information I have given is shown to be false or deliberately misleading.

ii) I am aware that the funding covers only this school year and that I must reapply next year; there is no guarantee that I will receive funding for future years even if I am eligible for the current year.

Signed (Student):	Date:
Print name:	

Signed (Parent/Guardian, Person 1 or 2):	Date:
Print name:	